

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)**

SERIAL NO. 1

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEF.	IND.	DEF.	IND.	DEF.
1						
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49						
50						
TOTAL IND.	3					
TOTAL DEF.	42					
TOTAL						

	IND.	DEF.	IND.	DEF.	IND.	DEF.
61						
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